Public spending on health in **India**

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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether according to data available in Human Development Report, 2004 India ranks 171 out of 175 countries in terms of public spending on health;

(b) if so, whether public spending on health in India is a mere 0.9 per cent of GDP;

(c) whether according to the Planning Commission's latest review, there is just one doctor for 1008 people and one bed for 1223 of the population;

(d) if so, whether there is shortage of more than 42,000 doctors in Government run hospitals; and

(e) the steps Government propose to take to meet the shortage and also improve health spending in India?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (e) Although no ranking of countries is given for public spending on health in the Human Development Report 2004, based on data given in the Report, it is seen that India ranks 171 out of 175 countries in terms of public spending on health. According to this Report, the total health expenditure as a % of GDP in India is 5.1 % of which 0.9% of GDP is the share of public health expenditure in the year 2001.

Planning Commission has only done an internal review of the health sector based on data/information supplied by the Ministry of Health and Family Welfare. As per the statistics worked out by the Medical Council of India, the availability of allopathic doctors is at present in the ratio 1:1800. If the practitioners of Indian System of Medicine and Homoeopathy are also taken into account, the ratio of availability of doctors to the population improves to 1:800. Similarly, the population bed ratio (allopathic beds) is 1:1503 *i.e.* one bed for 1503 persons as on 1.1.2002. This improves to 1:1124 if all types of beds are considered.

The Central Government hospitals are manned by doctors from Central Health Services (CHS) cadre, which has about 850 vacant posts against a sanctioned strength of about 4700 doctors. In so far as hospitals run by the State Governments are concerned, norms regarding requirement of doctors have been prescribed for Primary Health Centres (PHCs) and Community Health Centres (CHCs). As per information available up to March, 2002, there is a shortage of 1779 doctors at PHCs *vis-a-vis* the norms in 8 States across the country. However, at the CHC level, shortage of about 7500 specialists have been reported by all the State Governments *vis-a-vis* the norms. In addition, there are hospitals at the sub-district/district and the State level. The filling up of posts of doctors in such hospitals falls under the purview of State Governments and no norms have been prescribed for them by the Centre.

The Central Government has adopted the policy of downsizing its staff strength. Department of Health has taken up the matter for seeking exemption of technical/scientific posts of the health sector (which includes all CHS posts) from the purview of instructions of Department of Personnel and Training under this policy. Assistance is provided to the States for engaging private anaesthetists and doctors trained in Medical Termination of Pregnancy techniques on contractual basis, to take care of emergency obstetric care and alleviate the shortage of trained manpower at the CHC level. Government is making all out efforts to increase expenditure on health subejct to sectoral priorities and overall budetary resources. External assistance from bilateral and multilateral agencies is also mobilised to augment the resources for the health sector. The National Common Minimum Programme envisages increasing public spending on health to at least 2-3% of Gross Domestic Product (GDP) over the next 5 years. The National Health Policy-2002 also envisages inceasing public health investment to 2% of GDP by 2010. To achieve this, the Health Policy stipulates increasing the expenditure on health by state Governments to 7% of their budget by 2005 and to 8% of their budget by 2010. The Policy further envisages to raise the Central Government's contribution to States from 15% to 25% by 2010.